FORMATTING DATE: 22 July 2022
ENGLISH LANGUAGE: 22 July 2022

DEMOGRAPHIC AND HEALTH SURVEYS
CHILD WELL-BEING AND HOUSEHOLD STRUCTURE
MODEL HOUSEHOLD QUESTIONNAIRE

[NAME OF COUNTRY]
[NAME OF ORGANIZATION]

IDENTIFICATION (1)

PLACE NAME _____

NAME OF HOUSEHOLD HEAD _____

CLUSTER NUMBER . . . . . | | | | |

HOUSEHOLD NUMBER . . . . . | | | | |

HOUSEHOLD SELECTED FOR MAN'S SURVEY? (1=YES, 2=NO) . . . . . |

INTERVIEWER VISITS

	1	2	3	FINAL VISIT
DATE				DAY
				MONTH
				YEAR
INTERVIEWER'S NAME				INT. NO.
RESULT*				RESULT*
NEXT VISIT:DATE				TOTAL NUMBER OF VISITS
TIME				

*RESULT CODES:

1 COMPLETED
2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT
3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME
4 POSTPONED
5 REFUSED
6 DWELLING VACANT OR ADDRESS NOT A DWELLING
7 DWELLING DESTROYED
8 DWELLING NOT FOUND
9 OTHER _____ (SPECIFY)

TOTAL PERSONS IN HOUSEHOLD | |

TOTAL ELIGIBLE WOMEN | |

TOTAL ELIGIBLE MEN | |

LINE NO. OF RESPONDENT TO HOUSEHOLD QUESTIONNAIRE | |

LANGUAGE OF QUESTIONNAIRE** 0 1 | LANGUAGE OF INTERVIEW** | | NATIVE LANGUAGE OF RESPONDENT** | | TRANSLATOR USED (YES = 1, NO = 2)

LANGUAGE OF QUESTIONNAIRE** **ENGLISH**

**LANGUAGE CODES:
01 ENGLISH
02 LANGUAGE 2
03 LANGUAGE 3
04 LANGUAGE 4
05 LANGUAGE 5
06 LANGUAGE 6

TEAM	TEAM SUPERVISOR	CAPI SUPERVISOR (2)
NUMBER	NAME / NUMBER	NAME / NUMBER

(1) This section should be adapted for country-specific survey design.

(2) Remove the section for recording the name and ID number of the CAPI supervisor if the survey does not have CAPI supervisors who are separate from the team supervisors.

HOUSEHOLD SCHEDULE

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE		AGE	IF AGE 15 OR OLDER: MARITAL STATUS	ELIGIBILITY		
1	2	3	4	5	6	7	8	9	10	11
	Please give me the names of the persons who usually live in your household and guests of the household who stayed here last night, starting with the head of the household. AFTER LISTING THE NAMES AND RECORDING THE RELATIONSHIP AND SEX FOR EACH PERSON, ASK QUESTIONS 7A-7C TO BE SURE THAT THE LISTING IS COMPLETE. THEN ASK APPROPRIATE QUESTIONS IN COLUMNS 5-20 FOR EACH PERSON.	What is the relationship of (NAME) to the head of the household? SEE CODES BELOW.	Is (NAME) male or female?	Does (NAME) usually live here?	Did (NAME) stay here last night?	How old is (NAME)? IF 95 OR MORE, RECORD '95'.	What is (NAME)'s current marital status? 1 = MARRIED OR LIVING TOGETHER 2 = DIVORCED/ SEPARATED 3 = WIDOWED 4 = NEVER-MARRIED AND NEVER LIVED TOGETHER	CIRCLE LINE NUMBER OF ALL WOMEN AGE 15-49	**IF HOUSE-HOLD SELEC-TED FOR MAN'S SURVEY** CIRCLE LINE NUMBER OF ALL MEN AGE 15-[49]	CIRCLE LINE NUMBER OF ALL CHILDREN AGE 0-5
01			M F 1 2	Y N 1 2	Y N 1 2	IN YEARS		01	01	01
02			1 2	1 2	1 2			02	02	02
03			1 2	1 2	1 2			03	03	03
04			1 2	1 2	1 2			04	04	04
05			1 2	1 2	1 2			05	05	05
06			1 2	1 2	1 2			06	06	06
07			1 2	1 2	1 2			07	07	07
08			1 2	1 2	1 2			08	08	08
09			1 2	1 2	1 2			09	09	09
10			1 2	1 2	1 2			10	10	10

7A) Just to make sure that I have a complete listing: are there any other people such as small children or infants that we have not listed? YES ☐ → ADD TO TABLE NO ☐

7B) Are there any other people who may not be members of your family, such as domestic servants, lodgers, or friends who usually live here? YES ☐ → ADD TO TABLE NO ☐

7C) Are there any guests or temporary visitors staying here, or anyone else who stayed here last night, who have not been listed? YES ☐ → ADD TO TABLE NO ☐

CODES FOR Q. 3: RELATIONSHIP TO HEAD OF HOUSEHOLD

01 = HEAD
02 = WIFE OR HUSBAND
03 = SON OR DAUGHTER
04 = SON-IN-LAW OR DAUGHTER-IN-LAW
05 = GRANDCHILD
06 = PARENT
07 = PARENT-IN-LAW
08 = BROTHER OR SISTER
09 = OTHER RELATIVE
10 = ADOPTED/FOSTER/ STEPCHILD
11 = NOT RELATED
98 = DON'T KNOW

	IF AGE 0-17 YEARS					
LINE NO.	SURVIVORSHIP AND RESIDENCE OF BIOLOGICAL PARENTS					
	12	**12A**	**13**	**14**	**14A**	**15**
	Is (NAME)'s biological mother alive?	In what year did (NAME)'s biological mother die? RECORD YEAR OF DEATH. IF DOESN'T KNOW, RECORD '9998'.	Does (NAME)'s biological mother usually live in this household or was she a guest last night? IF YES: What is her name? RECORD MOTHER'S LINE NUMBER. IF NO, RECORD '00'.	Is (NAME)'s biological father alive?	In what year did (NAME)'s biological father die? RECORD YEAR OF DEATH. IF DOESN'T KNOW, RECORD '9998'.	Does (NAME)'s biological father usually live in this household or was he a guest last night? IF YES: What is his name? RECORD FATHER'S LINE NUMBER. IF NO, RECORD '00'.
01	Y N DK 1 2 8 ↓ ↓ GO TO 13 GO TO 14	GO TO 14		Y N DK 1 2 8 ↓ ↓ GO TO 15 GO TO 15A	GO TO 15A	
02	1 2 8 ↓ ↓ GO TO 13 GO TO 14	GO TO 14		1 2 8 ↓ ↓ GO TO 15 GO TO 15A	GO TO 15A	
03	1 2 8 ↓ ↓ GO TO 13 GO TO 14	GO TO 14		1 2 8 ↓ ↓ GO TO 15 GO TO 15A	GO TO 15A	
04	1 2 8 ↓ ↓ GO TO 13 GO TO 14	GO TO 14		1 2 8 ↓ ↓ GO TO 15 GO TO 15A	GO TO 15A	
05	1 2 8 ↓ ↓ GO TO 13 GO TO 14	GO TO 14		1 2 8 ↓ ↓ GO TO 15 GO TO 15A	GO TO 15A	
06	1 2 8 ↓ ↓ GO TO 13 GO TO 14	GO TO 14		1 2 8 ↓ ↓ GO TO 15 GO TO 15A	GO TO 15A	
07	1 2 8 ↓ ↓ GO TO 13 GO TO 14	GO TO 14		1 2 8 ↓ ↓ GO TO 15 GO TO 15A	GO TO 15A	
08	1 2 8 ↓ ↓ GO TO 13 GO TO 14	GO TO 14		1 2 8 ↓ ↓ GO TO 15 GO TO 15A	GO TO 15A	
09	1 2 8 ↓ ↓ GO TO 13 GO TO 14	GO TO 14		1 2 8 ↓ ↓ GO TO 15 GO TO 15A	GO TO 15A	
10	1 2 8 ↓ ↓ GO TO 13 GO TO 14	GO TO 14		1 2 8 ↓ ↓ GO TO 15 GO TO 15A	GO TO 15A	

HOUSEHOLD SCHEDULE

	IF AGE 15-17 YEARS	IF AGE 0-17 YEARS			IF AGE 4 YEARS OR OLDER		IF AGE 4-24 YEARS		IF AGE 0-4 YEARS
LINE NO.		PRIMARY CAREGIVER			EVER ATTENDED SCHOOL		CURRENT/RECENT SCHOOL ATTENDANCE		BIRTH REGISTRATION
	15A	**15B**	**15C**	**15D**	**16**	**17**	**18**	**19**	**20**
	CHECK Q. 8: CODES 1, 2, OR 3 SELECTED ?	CHECK Q. 5, 13 AND 15: IS CHILD IS A USUAL RESIDENT OF THIS HOUSEHOLD AND NEITHER BIOLOGICAL PARENT IS A USUAL RESIDENT ?	Who is (NAME)'s primary caregiver? That is, the person who provides daily care for the child? RECORD CARE GIVER'S LINE NUMBER. IF CHILD HAS NO CAREGIVER, RECORD '95'.	What is the relationship of the primary caregiver to (NAME)? SEE CODES BELOW.	Has (NAME) ever attended school or any early childhood education program?	What is the highest level of school (NAME) has attended? What is the highest grade (NAME) completed at that level? SEE CODES BELOW.	Did (NAME) attend school or any early childhood education program at any time during the [2019-2020] school year? (1)	During [this/that] school year, what level and grade [is/was] (NAME) attending? SEE CODES BELOW.	Does (NAME) have a birth certificate? IF NO, PROBE: Has (NAME)'s birth ever been registered with the civil authority? 1 = HAS CERTIFICATE 2 = REGISTERED 3 = NEITHER 8 = DON'T KNOW
01	Y N 1 2 ↓ GO TO 16	Y N 1 2 ↓ GO TO 16	IF '95' GO TO 16		Y N 1 2 ↓ GO TO 20	LEVEL GRADE	Y N 1 2 ↓ GO TO 20	LEVEL GRADE	
02	1 2 ↓ GO TO 16	1 2 ↓ GO TO 16	IF '95' GO TO 16		1 2 ↓ GO TO 20		1 2 ↓ GO TO 20		
03	1 2 ↓ GO TO 16	1 2 ↓ GO TO 16	IF '95' GO TO 16		1 2 ↓ GO TO 20		1 2 ↓ GO TO 20		
04	1 2 ↓ GO TO 16	1 2 ↓ GO TO 16	IF '95' GO TO 16		1 2 ↓ GO TO 20		1 2 ↓ GO TO 20		
05	1 2 ↓ GO TO 16	1 2 ↓ GO TO 16	IF '95' GO TO 16		1 2 ↓ GO TO 20		1 2 ↓ GO TO 20		
06	1 2 ↓ GO TO 16	1 2 ↓ GO TO 16	IF '95' GO TO 16		1 2 ↓ GO TO 20		1 2 ↓ GO TO 20		
07	1 2 ↓ GO TO 16	1 2 ↓ GO TO 16	IF '95' GO TO 16		1 2 ↓ GO TO 20		1 2 ↓ GO TO 20		
08	1 2 ↓ GO TO 16	1 2 ↓ GO TO 16	IF '95' GO TO 16		1 2 ↓ GO TO 20		1 2 ↓ GO TO 20		
09	1 2 ↓ GO TO 16	1 2 ↓ GO TO 16	IF '95' GO TO 16		1 2 ↓ GO TO 20		1 2 ↓ GO TO 20		
10	1 2 ↓ GO TO 16	1 2 ↓ GO TO 16	IF '95' GO TO 16		1 2 ↓ GO TO 20		1 2 ↓ GO TO 20		

CODES FOR Q. 15D

01 = BIOLOGICAL MOTHER/FATHER
02 = GRANDPARENT
03 = AUNT/UNCLE
04 = BROTHER OR SISTER
05 = OTHER RELATIVE OF CHILD
06 = STEPMOTHER/STEPFATHER
07 = RELATIVE OF STEPPARENT
08 = FORMAL FOSTER/ ADOPTED PARENT
09 = FRIEND
96 = OTHER (SPECIFY)

CODES FOR Qs. 17 AND 19: EDUCATION

LEVEL
0 = EARLY CHILDHOOD EDUCATION PROGRAM
1 = PRIMARY
2 = SECONDARY
3 = HIGHER
8 = DON'T KNOW

GRADE
00 = LESS THAN 1 YEAR COMPLETED (USE '00' FOR Q. 17 ONLY. THIS CODE IS NOT ALLOWED FOR Q. 19.)
98 = DON'T KNOW

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
CW01	CHECK COLUMNS 5 AND 7: ANY DE JURE CHILDREN AGE 0-17? YES ☐ ↓ NO ☐ →		NEXT SEC.
CW02	CHECK COLUMNS 5, 13, AND 15: ANY DE JURE CHILDREN AGE 0-17 WHOSE BIOLOGICAL MOTHERS OR FATHERS ARE NOT LISTED IN THE HOUSEHOLD SCHEDULE (COLUMN 13 OR COLUMN 15 IS '00') ? NO ☐ ↓ YES ☐ →		CW04
CW03	CHECK COLUMNS 5, 13, AND 15: ANY DE JURE CHILDREN AGE 0-17 WHOSE BIOLOGICAL MOTHERS OR FATHERS ARE VISITORS TO THE HOUSEHOLD? ('2' IS RECORDED IN COLUMN 5 ON THE ROW IN THE HOUSEHOLD SCHEDULE CORRESPONDING TO THE CHILD'S BIOLOGICAL MOTHER OR FATHER). YES ☐ ↓ NO ☐ →		NEXT SEC.
CW04	LIST EACH OF THE DE JURE CHILDREN AGE 0-17 YEARS WHOSE BIOLOGICAL MOTHERS OR FATHERS DO NOT USUALLY LIVE IN THE HOUSEHOLD BELOW IN THE ORDER THEY APPEAR IN THE HOUSEHOLD SCHEDULE. RECORD THE LINE NUMBER AND NAME FOR EACH CHILD, AND RECORD WHETHER OR NOT THE CHILD'S BIOLOGICAL MOTHER AND FATHER USUALLY LIVE ELSEWHERE, USUALLY LIVE IN THIS HOUSEHOLD, OR ARE DEAD.		

CW04A. RANK NUMBER	CW04B. HH LINE NUMBER	CW04C. NAME FROM COL. 2	CW04D. MOTHER'S STATUS	CW04E. FATHER'S STATUS
01	☐☐	_____	USU LIVES ELSEWH 1 USU LIVES THIS HH 2 DEAD 3	USU LIVES ELSEWH 1 USU LIVES THIS HH 2 DEAD 3
02	☐☐	_____	USU LIVES ELSEWH 1 USU LIVES THIS HH 2 DEAD 3	USU LIVES ELSEWH 1 USU LIVES THIS HH 2 DEAD 3
03	☐☐	_____	USU LIVES ELSEWH 1 USU LIVES THIS HH 2 DEAD 3	USU LIVES ELSEWH 1 USU LIVES THIS HH 2 DEAD 3
04	☐☐	_____	USU LIVES ELSEWH 1 USU LIVES THIS HH 2 DEAD 3	USU LIVES ELSEWH 1 USU LIVES THIS HH 2 DEAD 3
05	☐☐	_____	USU LIVES ELSEWH 1 USU LIVES THIS HH 2 DEAD 3	USU LIVES ELSEWH 1 USU LIVES THIS HH 2 DEAD 3

CW05	CHECK CW04: RECORD THE NAME AND HOUSEHOLD LINE NUMBER OF THE (FIRST/NEXT) CHILD WHOSE BIOLOGICAL MOTHER AND/OR FATHER ARE ALIVE, BUT ARE NOT USUAL RESIDENTS OF THIS HOUSEHOLD. NAME _____ HOUSEHOLD LINE NUMBER . . . . . ☐☐		
CW06	Now I would like to ask you some questions about (NAME OF CHILD FROM CW05).		
CW07	CHECK CW04D: MOTHER'S STATUS CODE '1' CIRCLED ☐ ↓ CODE '2' OR '3' CIRCLED ☐ →		CW19
CW08	How long has it been since (NAME) and (NAME)'s mother have lived together? IF LESS THAN 1 YEAR, RECORD ANSWER IN MONTHS. IF 1 YEAR OR MORE, RECORD ANSWER IN COMPLETED YEARS. IF (NAME) AND (NAME)'S MOTHER NEVER LIVED TOGETHER, RECORD '995'.	MONTHS . . . . . 1 YEARS . . . . . 2 NEVER LIVED TOGETHER . . . . . .995 DON'T KNOW 998	☐☐ ☐☐

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	NAME _____	HOUSEHOLD LINE NUMBER ..... [ ][ ]	
CW09	In the last 6 months, how often has (NAME)'s biological mother seen or communicated with (NAME): almost every day, at least once a week, at least once a month, less than once a month, or not at all?	ALMOST EVERY DAY ..... 1 AT LEAST ONCE A WEEK ..... 2 AT LEAST ONCE A MONTH ..... 3 LESS THAN ONCE A MONTH ..... 4 NOT AT ALL ..... 5 DON'T KNOW 8	
CW10	CAPI WILL CHECK DATA COLLECTED UP TO THIS POINT TO DETERMINE WHETHER OR NOT QUESTIONS CW13-CW17 HAVE ALREADY BEEN ASKED FOR ANOTHER CHILD WHO HAS THE SAME MOTHER AS THIS CHILD, OR IF THIS CANNOT BE DETERMINED FROM DATA ALREADY COLLECTED. UNKNOWN IF CW13-17 HAVE BEEN ASKED FOR MOTHER OF THIS CHILD ☐ CW13-17 HAVE NOT BEEN ASKED ABOUT THE MOTHER OF THIS CHILD ☐ → CW13 CW13-17 HAVE BEEN ASKED ABOUT THE MOTHER OF THIS CHILD ☐ → CW18		
CW11	Does (NAME) have the same biological mother as another child I have already asked you about?	YES ..... 1 NO ..... 2 DON'T KNOW 8	→ CW13
CW12	Which child has the same biological mother as (NAME)? RECORD THE HOUSEHOLD LINE NUMBER OF THE CHILD WITH THE SAME BIOLOGICAL MOTHER AS (NAME).	MATERNAL SIBLING HOUSEHOLD LINE NUMBER ..... [ ][ ]	→ CW18
CW13	Is (NAME)'s biological mother married or living with a man as if married?	YES, MARRIED OR LIVING TOGETHER ..... 1 NO ..... 2 DON'T KNOW 8	→ CW15
CW14	Is this man (NAME)'s biological father?	YES ..... 1 NO ..... 2 DON'T KNOW 8	
CW15	Does (NAME)'s biological mother send money or goods to this household?	YES ..... 1 NO ..... 2 DON'T KNOW 8	
CW16	Does (NAME)'s biological mother receive money or goods from this household?	YES ..... 1 NO ..... 2 DON'T KNOW 8	
CW17 (2)	Where does (NAME)'s biological mother live?	IN ANOTHER HOUSEHOLD IN THE SAME [REGION] ..... 1 IN A HOUSEHOLD IN ANOTHER [REGION] ..... 2 IN AN INSTITUTION IN THIS COUNTRY ..... 3 IN ANOTHER COUNTRY ..... 4 DON'T KNOW 8	
CW18	CHECK CW04E: FATHER'S STATUS CODE '1' CIRCLED ☐ CODE '2' OR '3' CIRCLED ☐ → CW29		
CW19	How long has it been since (NAME) and (NAME)'s father have lived together? IF LESS THAN 1 YEAR, RECORD ANSWER IN MONTHS. IF 1 YEAR OR MORE, RECORD ANSWER IN COMPLETED YEARS. IF (NAME) AND (NAME'S) FATHER NEVER LIVED TOGETHER, RECORD '995'.	MONTHS ..... 1 YEARS ..... 2 [ ][ ] NEVER LIVED TOGETHER ..... 995 DON'T KNOW 998	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	NAME _____	HOUSEHOLD LINE NUMBER ..... ☐☐	
CW20	In the last 6 months, how often has (NAME)'s biological father seen or communicated with (NAME): almost every day, at least once a week, at least once a month, less than once a month, or not at all?	ALMOST EVERY DAY ..... 1 AT LEAST ONCE A WEEK ..... 2 AT LEAST ONCE A MONTH ..... 3 LESS THAN ONCE A MONTH ..... 4 NOT AT ALL ..... 5 DON'T KNOW 8	
CW21	CAPI WILL CHECK DATA COLLECTED UP TO THIS POINT TO DETERMINE WHETHER OR NOT QUESTIONS CW24-CW28 HAVE ALREADY BEEN ASKED FOR ANOTHER CHILD WHO HAS THE SAME FATHER AS THIS CHILD, OR IF THIS CANNOT BE DETERMINED FROM DATA ALREADY COLLECTED. CW24-CW28 HAVE NOT BEEN ASKED ABOUT THE FATHER OF THIS CHILD ☐ → CW24 UNKNOWN IF CW24-CW28 HAVE BEEN ASKED FOR FATHER OF THIS CHILD ☐ ↓ CW24-CW28 HAVE BEEN ASKED ABOUT THE FATHER OF THIS CHILD ☐ → CW29		
CW22	Does (NAME) have the same biological father as another child I have already asked you about?	YES ..... 1 NO ..... 2 DON'T KNOW 8	☐ → CW24
CW23	Which child has the same biological father as (NAME)? RECORD THE HOUSEHOLD LINE NUMBER OF THE CHILD WITH THE SAME BIOLOGICAL FATHER AS (NAME).	PATERNAL SIBLING HOUSEHOLD LINE NUMBER ..... ☐☐	→ CW29
CW24	CHECK CW14: IS CHILD'S BIOLOGICAL MOTHER MARRIED TO (OR LIVING WITH) CHILD'S BIOLOGICAL FATHER? NO, DON'T KNOW OR NOT ASKED ☐ ↓ YES ☐ → CW26		
CW25	Is (NAME)'s biological father married or living with a woman as if married?	YES, MARRIED OR LIVING TOGETHER ..... 1 NO ..... 2 DON'T KNOW 8	
CW26	Does (NAME)'s biological father send money or goods to this household?	YES ..... 1 NO ..... 2 DON'T KNOW 8	
CW27	Does (NAME)'s biological father receive money or goods from this household?	YES ..... 1 NO ..... 2 DON'T KNOW 8	
CW28 (2)	Where does (NAME)'s biological father live?	IN ANOTHER HOUSEHOLD IN THE SAME [REGION] ..... 1 IN A HOUSEHOLD IN ANOTHER [REGION] ..... 2 IN AN INSTITUTION IN THIS COUNTRY ..... 3 IN ANOTHER COUNTRY ..... 4 DON'T KNOW 8	
CW29	CHECK CW04: ANY MORE DE JURE CHILDREN AGE 0-17 WHOSE BIOLOGICAL MOTHER AND/OR FATHER ARE ALIVE, BUT ARE NOT USUAL RESIDENTS OF THIS HOUSEHOLD? YES ☐ ↓ (GO TO CW05 FOR NEXT CHILD) NO ☐ → NEXT SEC.		

CHILD WELL-BEING AND HOUSEHOLD STRUCTURE: FOOTNOTES

(1) In Q. 18, the year should refer to the school year that is in session at the time the survey begins. If the survey begins between two school years, then the year should refer to the school year that just ended.
(2) Change [REGION] to the name of the first administrative unit in the country; for example, district or state.